

SUP # 2017-0093



Administrative Special Use Permit Application

Please type or print legibly

PROPERTY LOCATION: 727 N. Henry Street

ZONE: CSL

TAX MAP REFERENCE: 054.05-05-01

APPLICANT'S INFORMATION:

Applicant: Kimberly P. Sickmen Business/Trade Name: Grateful Juice Co. LLC

Address: 726 Timber Branch Drive Alexandria, VA 22301

Phone: (301) 312-3812

Email: kimberly@gratefuljuiceco.com

PROPOSED USE:

- | | |
|--|--|
| <input type="checkbox"/> Animal Care Facility with Overnight Boarding | <input type="checkbox"/> Outdoor Display |
| <input type="checkbox"/> Automobile and Trailer Rental and Sales | <input type="checkbox"/> Outdoor Food and Crafts Market Center |
| <input type="checkbox"/> Catering Business | <input type="checkbox"/> Outdoor Garden Center |
| <input type="checkbox"/> Day Care | <input checked="" type="checkbox"/> Restaurant |
| <input type="checkbox"/> Health and Athletic Club | <input type="checkbox"/> Valet Parking |
| <input type="checkbox"/> Light Auto Repair | |
| <input type="checkbox"/> Live Theater | |
| <input type="checkbox"/> Massage Establishment | |
| <input type="checkbox"/> Motor Vehicle Storage/Parking for 20 or more Vehicles | |
| <input type="checkbox"/> Outdoor Dining (exclude King Street Retail Overlay) | |

Please read and sign after the statement:

I have read and understand the general standards and the requirements for the use for which I am applying and have attached the Worksheet for the use.

Signature: M. Catharine Puskar M. Catharine Puskar, Attorney/Agent

Please submit the following with this application form:

Site Plan At a minimum, show and label the subject property, surrounding buildings, and streets. Show, label and give dimensions for all parking spaces, entrances and exits, and trees and shrubbery.

Floor Plan At a minimum, show and label all interior features inside and outside seats, tables, counters, equipment, etc. as appropriate to the use. Show, label and give dimensions for all entrance and exit doors and windows, rooms/areas, staircases, elevators and bathrooms.

Worksheet for specific use from Checklist and Worksheet package.

Other materials, as required by specific use (see Guide to Administrative SUPs Checklist & Worksheets).

PROPERTY OWNER'S AUTHORIZATION

As the property owner, I hereby grant the applicant use of 727 N. Henry Street
(property address), for the purposes of operating a restaurant (use)
business as described in this application.

I also grant permission to the City of Alexandria to visit, inspect, photograph and post placard notice on my property.

Name: Iacone/Henry Street LLC c/o Teddy Kim Phone (202) 834-4355

Address: P.O. Box 1924 Alexandria, VA 22313 Email: teddyk@avantihg.com

Signature: See attached executed consent letter. Date: _____

1. The applicant is the (check one):

- ☐ Owner
☐ Contract Purchaser
☒ Lessee or
☐ Other: _____

of the subject property.

State the name, address and percent of ownership of any person or entity owning an interest in the applicant or owner, unless the entity is a corporation or partnership, in which case identify each owner and the percent of ownership.

Grateful Juice Co. LLC is 100% owned by Kimberly P. Sickmen.

See attached for ownership breakdown of property owner.

If property owner or applicant is being represented by an authorized agent such as an attorney, realtor, or other person for which there is some form of compensation, does this agent or the business in which the agent is employed have a business license to operate in the City of Alexandria, Virginia?

☐ Yes. Provide proof of current City business license N/A

☐ No. The agent shall obtain a business license prior to filing application, if required by the City Code.

Kimberly P. Sickmen
726 Timber Branch Drive
Alexandria, Virginia 22301


Karl Moritz
301 King Street
City Hall, Room 2100
Alexandria, Virginia 22314

Re: Authorization to File Administrative Special Use Permit Application for a
Restaurant
727 N. Henry Street
Tax Map ID 054.04-05-01 (the "Property")

Dear Mr. Moritz:

As the owner of Grateful Juice Co. LLC, I hereby authorize Walsh, Colucci, Lubeley & Walsh, P.C. to act as agent on my behalf for the filing and representation of an application for an Administrative Special Use Permit and any related requests to allow for the establishment of a restaurant on the Property to be operated as Grateful Juice Bar.

Very truly yours,

By: 
Kimberly P. Sickmen
Owner, Grateful Juice Co. LLC

Date: 8/1/17

Iacone/Henry Street LLC
P.O. Box 1924
Alexandria, VA 22313

Iacone/Henry Street LLC
P.O. Box 1924
Alexandria, Virginia 22313

Karl Moritz
301 King Street
City Hall, Room 2100
Alexandria, Virginia 22314

Re: Consent to File Application for Administrative Special Use Permit
for a Restaurant
727 N. Henry Street
Tax Map ID 054.04-05-01 (the "Property")

Dear Mr. Moritz:

As owner of the above-referenced Property, Iacone/Henry Street LLC hereby consents to the filing of an application by Grateful Juice Co. LLC, c/o Kimberly Sickmen, for an Administrative Special Use Permit and any related requests to allow for the establishment of a restaurant on the Property to be operated as Grateful Juice Bar.

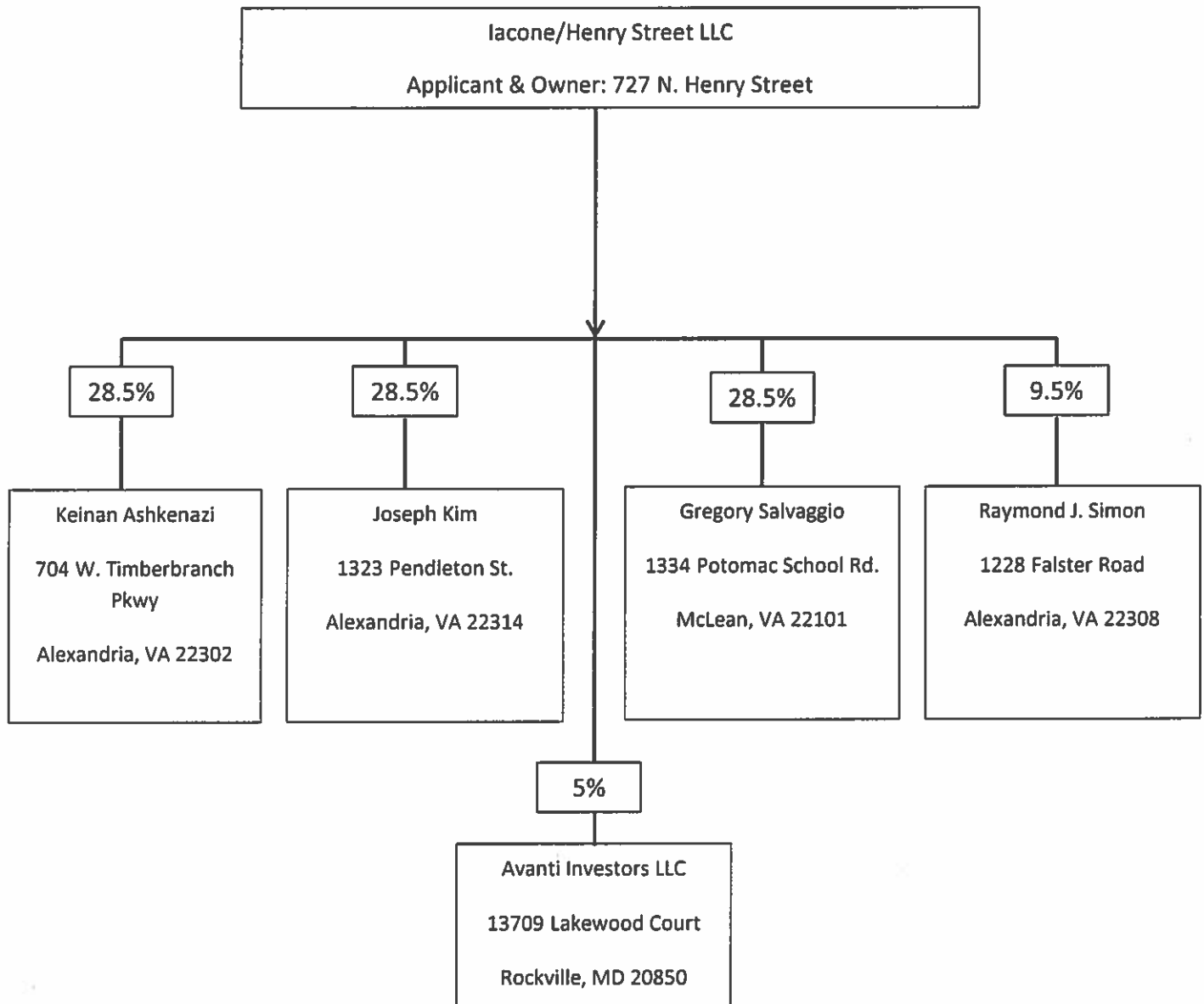
Very Truly Yours,

By: 
Teddy Kim

Its: Managing Member

Date: 08/01/17

Iacone/Henry Street LLC – Ownership Information
August 1, 2017



*None of the individuals or entities listed above have any business or financial relationship as defined by Section 11-350 of the Zoning Ordinance.

USE CHARACTERISTICS**2. Please give a brief statement describing the use:**

The proposed restaurant is an approximately 525 square foot walk-up juice bar that will offer hand crafted
juices, coffee, and a small menu of breakfast and lunch items. The neighborhood serving restaurant
will provide nearby residents with a healthy and convenient dining option.

3. Please describe the proposed hours of operation:

Days	Hours
Daily	

Or give hours for each day of the week

Monday	6:30 a.m. - 8:00 p.m.
Tuesday	6:30 a.m. - 8:00 p.m.
Wednesday	6:30 a.m. - 8:00 p.m.
Thursday	6:30 a.m. - 8:00 p.m.
Friday	6:30 a.m. - 3:00 p.m.
Saturday	8:00 a.m. - 2:00 p.m.
Sunday	8:00 a.m. - 2:00 p.m.

4. Please describe the capacity of the proposed use:

- A. How many patrons, clients, pupils and other such users do you expect? Specify time period (i.e., day, hour, or shift).

Approximately 70 patrons per day.

- B. How many employees, staff and other personnel do you expect? Specify time period (i.e., day, hour, or shift).

A maximum of three (3) employees will be on site at any given time.

5. A. How many parking spaces of each type are provided for the proposed use:

<u>0</u>	Standard and compact spaces
<u>0</u>	Handicapped accessible spaces
<u>0</u>	Other

*NOTE: Parking reduction requested in conjunction with SUP #2017-0079

- B. Please give the number of:
Parking spaces on-site 0
Parking spaces off-site 0

If the required parking will be located off-site, where will it be located?

Ample on-street parking is available throughout the surrounding area.

6. Please provide information regarding loading and unloading for the use:

- A. How many loading spaces are available for the use? 0
- B. Where are off-street loading spaces located? Loading operations will occur on street.
- C. During what hours of the day do you expect loading/unloading operations to occur? Deliveries will occur between 7:00 a.m. and 11:00 a.m.
- D. How frequently are loading/unloading operations expected to occur, per day or per week, as appropriate? Two deliveries are anticipated three days per week, for a total of approximately six deliveries per week.

7. If any hazardous materials or organic compounds (for example paint, ink, lacquer thinner, or cleaning or degreasing solvent), as defined by the state or federal government, be handled, stored, or generated on the property, provide the name, monthly quantity, and specific disposal method below:

Small quantities of organic compounds such as cleaning supplies commonly used in the operation of restaurants

will be stored on site and disposed of in accordance with all applicable regulations.

APPLICANT'S SIGNATURE

Please read and initial each statement:

Initial: MP THE UNDERSIGNED, hereby applies for a Special Use Permit in accordance with the provisions of Article XI, Section 11-500 of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

Initial: MP THE UNDERSIGNED, hereby attests that all of the information herein provided and specifically including all surveys, drawings, etc., required to be furnished by the applicant are true, correct and accurate to the best of their knowledge and belief. The applicant is hereby notified that any written materials, drawings or illustrations submitted in support of this application and any specific oral representations made to the Director of Planning and Zoning on this application will be binding on the applicant unless those materials or representations are clearly stated to be non-binding or illustrative of general plans and intentions, subject to substantial revision, pursuant to Article XI, Section 11-207(A)(10), of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

M. Catharine Puskar, Attorney/Agent

Print Name of Applicant or Representative

MPuskar
Signature8/2/17
Date

If this application is being filed by someone other than the business owner (such as an agent or attorney), please provide the information below:

Walsh, Colucci, Lubeley & Walsh, P.C.

Representative's Address: 2200 Clarendon Blvd, Suite 1300Arlington, Virginia 22201-3359Phone: (703) 528-4700Email: cpuskar@thelandlawyers.comFax: (703) 525-3197



SUPPLEMENTAL APPLICATION

RESTAURANT

All applicants requesting a Special Use Permit or an Administrative Use Permit for a restaurant shall complete the following section.

1. How many seats are proposed?

Indoors: 0 Outdoors: 0 Total number proposed: 0

2. Will the restaurant offer any of the following?

Alcoholic beverages (SUP only)	_____ Yes	<input checked="" type="checkbox"/> No
Beer and wine — on-premises	_____ Yes	<input checked="" type="checkbox"/> No
Beer and wine — off-premises	_____ Yes	<input checked="" type="checkbox"/> No

3. Please describe the type of food that will be served:

Hand crafted juices and smoothies, coffee and a small menu of breakfast and lunch items such as pastries, quinoa bowls, avocado toast, and open faced sandwiches.

4. The restaurant will offer the following service (check items that apply):

_____ table service _____ bar ☒ carry-out _____ delivery *The juice bar will also have an outdoor walk-up counter

5. If delivery service is proposed, how many vehicles do you anticipate? Not applicable

Will delivery drivers use their own vehicles? _____ Yes _____ No

Where will delivery vehicles be parked when not in use?

Not applicable

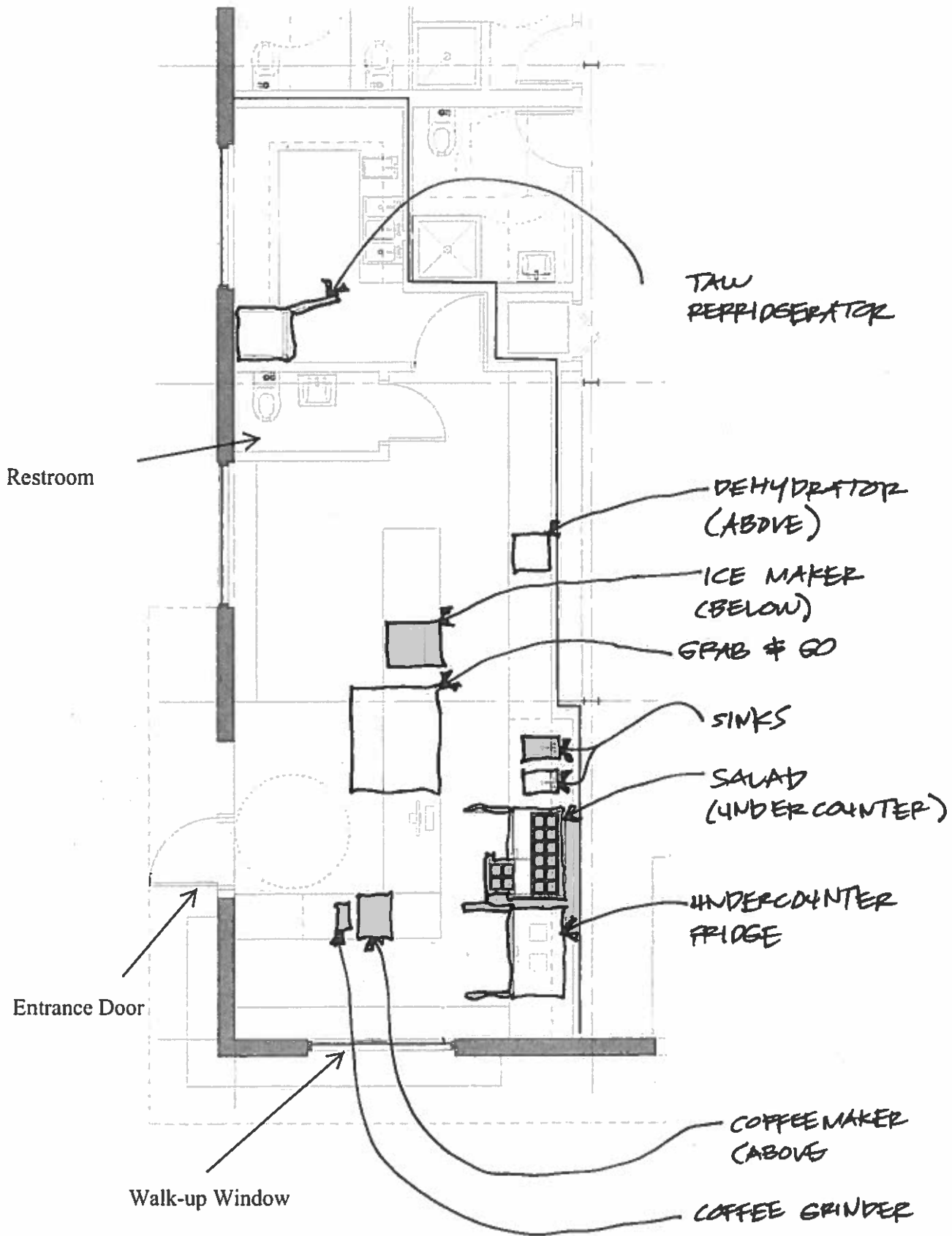
6. Will the restaurant offer any entertainment (i.e. live entertainment, large screen television, video games)?

_____ Yes ☒ No

If yes, please describe:

Not applicable

Proposed Floor Plan
Grateful Juice Bar
727 N. Henry Street
Approx. 525 sq. ft.

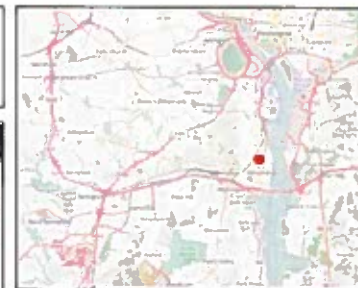
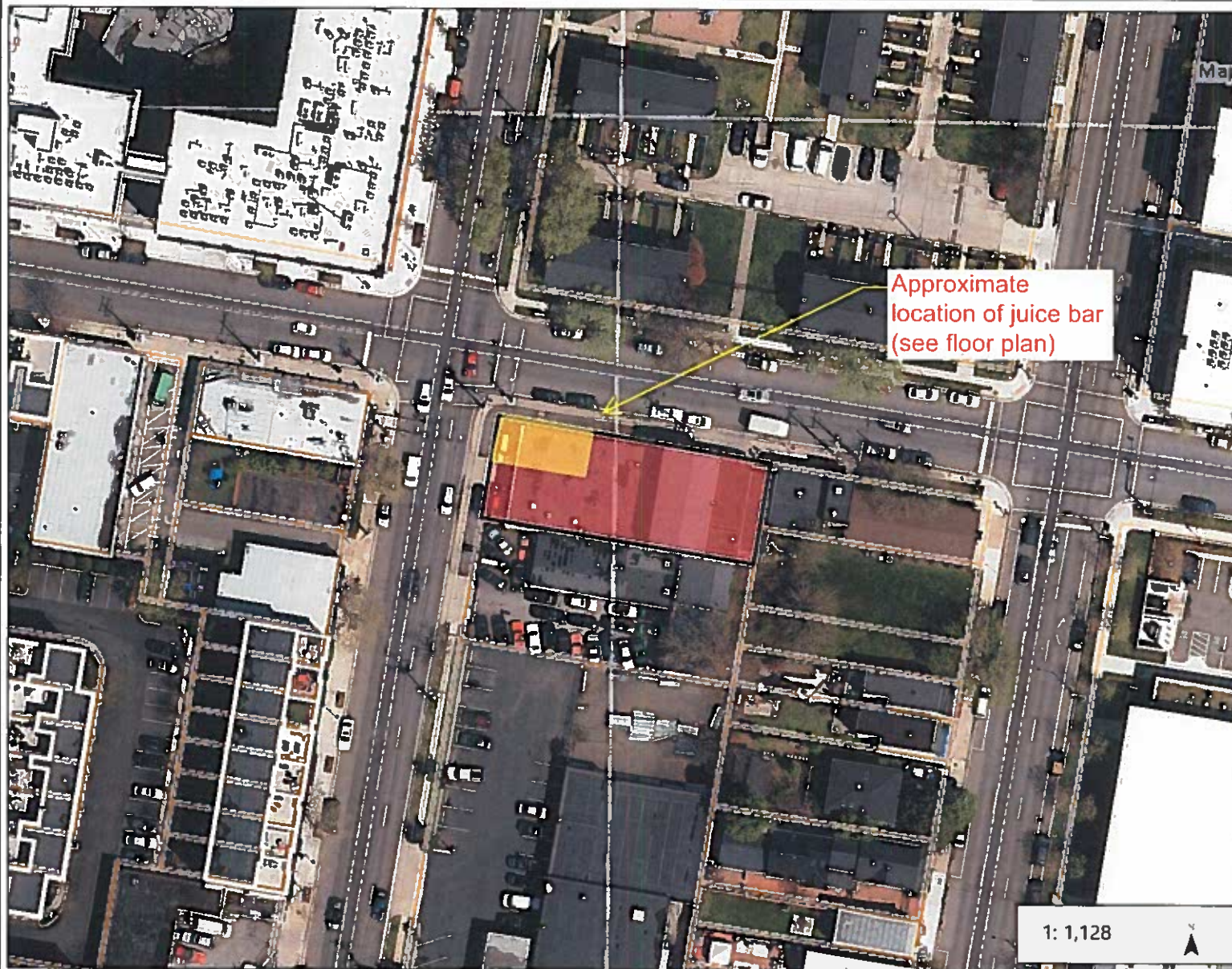


<-- N. Henry Street -->



City of Alexandria, Virginia

727 N. Henry Street



Legend

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- Rail Lines
- Parcels
- Buildings
- Surface Water
- Streams
- Parks
- City of Alexandria

1: 1,128



188.1 0 94.04 188.1 Feet

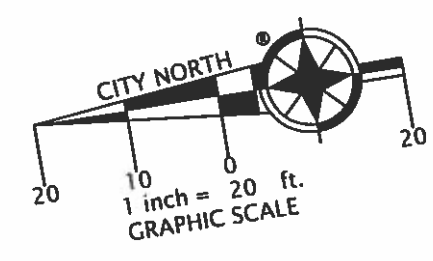
WGS_1984_Web_Mercator_Auxiliary_Sphere
City of Alexandria, VA

This map is a user generated static output from an Internet mapping site and is for reference only. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable.

THIS MAP IS NOT TO BE USED FOR NAVIGATION

Notes

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(DEED BOOK 735, PAGE 211)

CITY OF ALEXANDRIA, VIRGINIA
SCALE: 1" = 20' DECEMBER 13, 2016

8808-H PEAR TREE VILLAGE COURT
ALEXANDRIA, VIRGINIA 22309
703-619-6555
FAX: 703-799-6412

NEW FACADE

NOTE: This image is conceptual in nature and provided for illustrative purposes only.

